



Hiram Police Explorers Post # 1891

217 Main Street
Hiram, Georgia 30141
770-943-3087

Application for Entry

Applicant Name: _____
Last First Middle

Date Filled Out: _____

Age: _____

Return this completed packet to:
Any ranking officer
Within one week from packet issue date

ALL APPLICANTS ARE SUBJECT TO A BACKGROUND CHECK.
Registration is ONLY open to people between the ages of fourteen and twenty-one with NO criminal background. NO applicant is guaranteed a position in the program. ALL applicants wanting to join the Exploring Program must abide by all Learning for Life/Exploring rules and guidelines. ANY applicant may be terminated at any time for any reason the Police Department or Explorer Program see fit.

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Internal Memorandum

To: All new Applicants
From: The Chief of the Hiram Police Explorers
Regarding: Application Packet

Welcome!

This is a memo explaining what should be in this packet and brief descriptions on how to fill it out.

NOTICE: YOU **MUST HAVE THIS PACKET COMPLETED AND RETURNED WITHIN **ONE WEEK** AFTER YOU HAVE BEEN ISSUED IT TO COMPLETE THE ENTRY PHASE.**

PRINT ALL INFORMATION ON THE FORMS AND DOCUMENTS.

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WHAT TO DO WITH WHAT:

Internal Memorandum Uniforms	Read First
New Application Information	Read and Sign
Medical Release Form	Read and Parent/Guardian Sign
Hold Harmless and Release Form	Read and Sign and Parent/Guardian Sign
Personnel Phone Contact List	Complete
Explorer ID Card Information Sheet	Complete
Phone List Information	Hold onto! Do NOT return with Packet!
Emergency Information Form	Complete
Application For Entry Form	Complete and Sign

ALL forms and documents **MUST** be completed upon turning in this packet.
If you are missing any of the above listed forms, please contact an Explorer Officer listed on the Officer's Phone List.

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Internal Memorandum

To: All new Applicants
From: The Chief of the Hiram Police Explorers
Regarding: Uniforms

This is a memo explaining what equipment the Hiram Police Explorers issues to you and the optional items you can purchase.

ISSUED ITEMS:

- 1 Black Long sleeve t-shirt
- 1 Black short sleeve t-shirt
- 1 Basket-weave Gun Belt
- 1 Basket-weave Underbelt
- 1 Heavyweight Jacket

OPTIONAL ITEMS (PERSONALLY PURCHASED):

Handcuffs	AFTER CERTIFICATION ONLY
Handcuff Basket-weave Case	AFTER CERTIFICATION ONLY
Mag-Lite	Larger size, BLACK ONLY
Mini Mag-Lite	BLACK ONLY
Mini Mag-Lite Basket-weave holder	
Latex Gloves	
Latex Gloves Basket-weave pouch	
BLACK BDU shorts	
Belt Keepers- Basket-weave	

ITEMS WHICH ARE **REQUIRED** BUT NOT ISSUED:

- 1 BLACK 3-ring binder
- Blue or Black pens
- Kakhi BDU pants
- BLACK Magnum Hi-Tech Boots

ALL EQUIPMENT MUST BE APPROVED BEFORE PLACED ON THE DUTY BELT.

If you have problems with acquiring the appropriate funds to purchase required equipment or with paying your dues, please see the Explorer Advisor. All information will be kept strictly confidential.

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New Applicant Information

The following guidelines are to be followed by new applicants to the Hiram Police Explorers, Post 1891.

1. Members of the Hiram Police Explorers exemplify the standards of the Hiram Police Department. Only applicants with no criminal background need apply.
2. Hiram Police Explorers have regular meetings twice a month from 6:30 p.m. to 8:30 p.m.
3. Applicants must complete a signed Boy Scout application and once the application has been reviewed and approved turn in a \$33.00 nonrefundable fee before becoming a member of the Hiram Police Explorers.
4. Uniforms will only be issued to applicants when the post advisor sees that the applicant meets the standards of the Hiram Police Department and Hiram Police Explorers. All uniforms, patches, badges, or other equipment with Hiram Police, Hiram Police Explorers, or anything issued to represent Hiram Police or Hiram Police Explorers shall be the soul property of the Hiram Police Explorers and ownership may not be sold or transferred and the property may not be copied or changed in any way.
5. All uniforms, patches, badges, or other equipment with the Hiram Police, Hiram Police Explorers, or anything issued to represent Hiram Police or Hiram Police Explorers shall be returned to the post advisor or a representative designated by the post advisor within fourteen days from the date of graduation or termination from the post.
6. All uniforms, patches, badges, or other equipment with Hiram Police, Hiram Police Explorers, or anything issued to represent Hiram Police or Hiram Police Explorers shall be returned to the post advisor or a representative designated by the post advisor before sixty days of total absence from the post.
7. It shall be the responsibility of the new applicant to return all uniforms, patches, badges, or other equipment with the Hiram Police, Hiram Police Explorers, or anything issued to represent Hiram Police or Hiram Police Explorers as outlined in section five and six above.
8. After ninety days from graduation, termination, or total absence from the post, any uniforms, patches, badges, or other equipment with Hiram Police, Hiram Police Explorers, or anything issued to represent Hiram Police or Hiram Police Explorers which is not returned to the post advisor or a representative designated by the post advisor shall be considered to have been stolen and the post advisor or a representative designated by the post advisor shall seek criminal indictment against the new applicant.

New Applicant's Signature: _____ Date: _____

Parent's Signature: _____ Date: _____

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Medical Release Form

The undersigned, parents or guardians of _____,
a member of the Hiram Police Explorer Post 1891, the Hiram Police Department,
and/or one of the Advisors of the Hiram Police Explorer Post 1891, to treat for
injuries. This is to include transport and/or care at the local medical facility.

This form is for all activities the above Explorer will participate in with the Hiram
Police Explorer Post 1891.

Parent or Guardian's Signature

Date

Insurance Company

Insurance Policy Number

Name of Insured

Hiram Police Explorers

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Hold Harmless and Release Form

The undersigned, parents or guardians of _____,
a member of the Hiram Police Explorers Post 1891, hereby indemnifies and holds
harmless the Hiram Police Department, its agencies and employees, specifically
including any and all police officers or personnel involved with the supervision
and control of the Hiram Police Explorer Post 1891 from any claims of any kind
whatsoever or of any nature for the injury to the person or damage to the
property of _____, his/her parents, siblings, or
heirs. This indemnity and hold harmless agreement shall be considered a
complete and total waiver of any and all liability on the part of the City of Hiram,
I servants, agents or employees, and particularly the police officers engaged in
supervision and control as set forth hereinabove.

Printed Explorer's Name

Explorer's Signature

Date

Printed Parent or Guardian's Name

Parent or Guardian's Signature

Date

Notary Public

Subscribed and sworn to before me on this the _____ day of _____, 20__

My commission expires _____, 20__

Signature of notary
public _____

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Explorer ID Card Information Sheet

The below information will be used to process your Explorer ID Card. Please print legibly to prevent any mistakes when entering this information. You will be told when to report to have your ID picture made.

Name: _____
Last First Middle

Date of Birth: _____

Date of Membership: _____

Social Security Number: _____

Blood Type: _____

Height: _____

Weight: _____

Hair Color: _____

Eye Color: _____

Title of Rank: _____ Explorer _____

Hiram Police Explorers

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Phone List Information

Name: _____
Last First Middle

Address: _____
Street Apartment Number

City State Zip Code

Home Phone Number: _____

Cell Phone Number: _____

Email Address: _____

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Emergency Information Form

Full Name: _____

Address: _____

City

State

Zip Code

Phone Numbers: _____

Home

Work

Cell

Pager

Date of Birth: _____

Social Security Number: _____

Driver's License Number: _____

Insurance Company: _____ Policy Number: _____

Primary Card Holder's Name: _____

Parent(s)/Guardian(s) Name(s): _____

Mother/Female Guardian Home Phone: _____

Mother/Female Guardian Work Phone: _____

Mother/Female Guardian Cell Phone: _____

Father/Male Guardian Home Phone: _____

Father/Male Guardian Work Phone: _____

Father/Male Guardian Cell Phone: _____

* Continued Next Page *

Emergency Contact 1:

Name: _____ Relation: _____

Home Phone: _____ Work Phone: _____

Emergency Contact 2:

Name: _____ Relation: _____

Home Phone: _____ Work Phone: _____

Emergency Contact 3:

Name: _____ Relation: _____

Home Phone: _____ Work Phone: _____

Emergency Contact 4:

Name: _____ Relation: _____

Home Phone: _____ Work Phone: _____

Medical History:

Have you ever been hospitalized? YES NO

If YES, please explain: _____

Do you currently take any long-term medication? YES NO

If YES, please explain: _____

Do you suffer from any medical conditions? YES NO

If YES, please explain: _____

Are you allergic to anything? YES NO

If YES, please explain: _____

Is there anything you feel it is necessary for us to know? YES NO

If YES, please explain: _____

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Application for Entry

Personal Information:

Name: _____
Last First Middle

Address: _____
Street Apartment Number

City State Zip Code County

Phone Numbers: _____
Home Work

Cell Pager

Social Security Number: _____

Driver's License Number: _____

Male Female Race: _____

Date of Birth: _____ Age: _____

School: _____ Grade: _____

Hair Color: _____ Eye Color: _____

Height: _____ Weight: _____

Email Address: _____

Do you speak any other languages besides English? YES NO

If YES, please explain: _____

References:

No Family Members

Reference 1:

Name: _____ Relation: _____
Home Phone: _____ Work Phone: _____

Reference 2:

Name: _____ Relation: _____
Home Phone: _____ Work Phone: _____

Reference 3:

Name: _____ Relation: _____
Home Phone: _____ Work Phone: _____

Who recommended you to join the Explorer program?

Are you an U.S. citizen? YES NO

If NO, please explain why and if you are planning to be one: _____

Criminal History and Background:

Have you ever been arrested? YES NO

If YES, please explain when, why, and what department: _____

Have you ever had a traffic ticket? YES NO

If YES, please explain how many, when, and why: _____

Do you smoke cigarettes? YES NO

Do you chew tobacco? YES NO

Have you ever done drugs? YES NO

If YES, please explain when and what: _____

Have you ever consumed alcohol? YES NO

If YES, please explain when, why, and where: _____

Has there ever been any disciplinary action taken against you at school?

YES NO

If YES, please explain when and why? _____

Are you or were you ever affiliated with any cult, gang, or any organized crime?

YES NO

If YES, please explain when and who? _____

Extracurricular Activities:

Do you play any sports? YES NO

If YES, please explain what: _____

Have you ever been part of the Boy Scouts of America before? YES NO

If YES, please explain when and what: _____

Have you ever been terminated from another explorer post or any other Boy Scouts of America organization? YES NO

If YES, please explain when, why, and by whom:

What are your hobbies and interests? _____

Feel free to tell us about any achievements, groups you are with, and special abilities you might have, ect.: _____

Occupational Information:

Site of Employment: _____

Address of Site of Employment: _____

Street

City

State

Zip Code

Company Business Phone Number: _____

Name of Employer: _____

Employer's Business Phone Number: _____ Ext.: _____

Date in which you were hired: _____

How long have you been employed with your job? _____

What type of work do you do? Explain. _____

Fill in the hours that you work:

	Sun	Mon	Tue	Wed	Thurs	Fri	Sat
Begin:	_____	_____	_____	_____	_____	_____	_____
End:	_____	_____	_____	_____	_____	_____	_____

Total hours that you work in a regular week: _____ hours

How flexible is your schedule? Explain: _____

Would your job interfere with your explorer duties? YES NO

If YES, please explain how and why: _____

Have you ever been fired from a place of employment? YES NO

If YES, please explain when and why: _____

Short Essay:

Explain to us why you want to be a Hiram Police Explorer, what do you think this program is about, and where you heard about the explorer program.

[illegible]

FOR MORE ROOM USE ANOTHER SHEET AND ATTACH

Please read and sign:

All the information that I have given on this application is the truth, and I understand that if found untrue, it is grounds for termination or grounds for non-acceptance to the Hiram Police Explorer Post 1891. I also understand that all the previous information in this packet is held confidential.

Applicant's Signature

Date

Parent's Signature

Date

Notary Public

Subscribed and sworn to before me on this the _____ day of _____, 20__

My commission expires _____, 20__

Signature of notary
public _____

Reviewed by:

Director Signature

Date

Advisor Signature

Date